٠.	1817-0156PUS	; <u>i</u>
Attorney	Docket No	

BIRCH, STEWART, KOLASCH & BIRCH, LLP

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor in named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

	invention entitled:			oject matter wi	ich is claimed and for w	vnich a patent i	s sought on the		
Insert Title:	Information has	Information handling and processing							
Fill in Appropria Information - For Use Without Specification Attached:	The specification United States A and amended of the specification International A	are ronowning.			lication is identified by th	(if applicab	as		
	aniended on	· · · · · · · · · · · · · · · · · · ·				(if a	pplicable)		
	I acknowledge	the duty to disclose	information whi	ch ie material A	e above-identified specific to patentability as defined the United States of Amer y before my or our invertigation of the States of the subject of an invento America on an application of the United try foreign to the United tode, §119(a)-(d) of any foreign application for patent	cation, including	g the claims, a		
Insert Priority		ication(s)			•	Priority (Claimed		
Information:	S2002/0680	Ireland		16/08	/2002				
(if appropriate)	(Number)	(Country)	* .		Day/Year Filed)	Yes	No		
	(Number)	(Country)		(Month/I	Day/Year Filed)	Yes	□ No		
	(Number)	(Country)		(Month/I	Day/Year Filed)	Yes	No		
	(Number)	(Country)			Day/Year Filed)	Yes	□ No		
	- mercey chain the ben	ent under 11de 35, Ur	uted States Code,	\$119(e) of any U	nited States provisional a	pplications(s) lis	ted below.		
Insert Provisional Application(s): (if any)	(Application Number)	·		(Filing	Date)		· 		
	(Application Number)			(Filing	Data				
*	All Foreign Application the Filing Date of This	ns, if any, for any Pat Application:	tent or Inventor's	, ,	More than 12 Months (6	Months for Desi	gns) Prior to		
Insert Requested Information: (if appropriate)	Country		plication Number		Date of Filing (Month,	<u> </u>	- 		
	I hereby claim the ben- continuation-in-part ap disclosed in the prior U Code, §112, I acknowl Federal Regulations, § international filing date	efit under Title 35, Uplication(s) listed be nited States and/or Fedge the duty to disc 1.56 which became to of this application.	nited States Code low and, insofar CT application in close information available between	, §120 of any Unas the subject from the manner prowhich is materiate the filing date	nited States and/or PCT latter of each of the clair wided by the first paragra al to the patentability as of the prior application	application(s), in ns of this applic aph of Title 35, U defined in Title n and the natio	ncluding for ration is not inited States 37, Code of nal or PCT		
Insert Prior U.S. Application(s): (if any)	(Application Number)	(Fili	ng Date)		(Status - patented, pend	ding, abandoned			
Page 1 of 2 (Rev. 05/2004)	(Application Number)	(Fili	ng Date)		(Status - patented, pend	ding, abandoned)		

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			1817-0
I hereby appoint the practitioner	m of CUCTOS (ED 210, coope	Attorn	ey Docket No
I hereby appoint the practitioner this application and/or an internatio in the United States Patent and Tresulting patent based on instruction practitioners, unless the inventor(s) contrary:	s at COSTOMER NO. 02292 mal application based on this rademark Office connected to s received from the entity who or assignee provides said pra	as my attorneys or application and to therewith and in o o first sent the appl actitioners with a n	agents to prosecute transact all business connection with the ication papers to the written notice to the
Send Correspondence to:			
CUSTOMER NO. 02292 Telephone: (703) 205-8069	BIRCH, STEWART, KC Facsimile: (703) 20	DLASCH & BIRO 5-8050	TH, LLP)
I hereby declare that all statements made and belief are believed to be true; and further t the like so made are punishable by fine or imp such willful false statements may jeopardize the	,	THE MIND SERVE THAT WI	nts made on information Iful false statements and ted States Code and that
CIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DAT	E*, /
Residence (City, State & Country)	a. Jun	17	3/5/5
Dublin, Ireland LEX		CITIZENSHIP Irish	
MATING ADDRESS (Complete, Street, Address	Shipgiuding Gibt, Ship & Gounty)		
GIVEN NAME/FAMILY NAME Joseph Patrick Corcoran	INVENTOR'S SIGNATURE	DAT	
Residence (City, State & Country)	1 90 101		13/05
Dublin, Ireland		CITIZENSHIP Irish	
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GIVEN NAME/FAMILY NAME Christopher Michael Murphy	INVENTOR SIGNATORIA	DATE	211
Residence (City, State & Country) Dublin, Ireland K	' 	CITIZENSHIP	15/05
MAILING ADDRESS (Complete Street Address Kilmolin, Enniskerry, County Wick	including City, State & Country)	Irish	
GIVEN NAME/FAMILY NAME			
	INVENTOR'S SIGNATURE	DATE	
Residence (City, State & Country)		CITIZENSHIP	
MAILING ADDRESS (Complete Street Address	including City, State & Country)		
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GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*	
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GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*	

CITIZENSHIP

Page 2 of 2 (Rev. 05/2004)

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

*DATE OF SIGNATURE

Residence (City, State & Country)

MAILING ADDRESS (Complete Street Address including City, State & Country)